Nevada

AIDS Rate per 100,000

12.3*

State Funds for HIV Early Intervention Services

STATE EXPENDITURES				
Required Base	SFY 2007 Expenditures Maintenance			
\$10,900	\$263,787			

SAPT EXPENDITURES				
FY 2005 HIV Set-Aside	FY 2008 Planned			
\$643,330	\$649,819			

FY 2008 SAPT Reports

Set-aside is used to provide HIV outreach services, including HIV counseling, testing and referral. These services are provided via sub-grants in two counties in conjunction with SAPT funded HIV outreach projects conducted by Southern Nevada Health District, Northern Nevada HOPES, and the Bureau of Community Health. Projects utilized SAPT funds (\$10,625) to purchase rapid HIV test kits.

HIV EARLY INTERVENTION SERVICES PROVIDED								
Rapid Testing	Funding Rapid Testing	Regular HIV Testing	Pre-Test and Post-Test Counseling	Referral Services	Risk Assessment	HIV/AIDS Education	Outreach	
√	√	√	\checkmark	√	√	√	√	

State Narrative Summary

Nevada's Substance Abuse Prevention and Treatment Agency (SAPTA) provides HIV early intervention services based on the National Institute for Drug Abuse's Community-Based Outreach Model. Through this process, the SAPTA found that in order to provide adequate resources for people with substance abuse problems at risk for HIV infection, it needed to develop a coordinated system for outreach, screening, and assessment, as well as insure access to substance abuse treatment services. In Fiscal Year (FY) 2005, the

*The most recent data published prior to October 1, 2007 by the CDC is Table 14, Reported AIDS cases and annual rates (per 100,000 population), by area of residence and age category, cumulative through 2005-United States, HIV/AIDS Surveillance Report 2005 Vol. 17, U.S. Department of Health and Human services, Centers for Disease Control and Prevention, National Center for HIV, STD, and TB Prevention, Division of HIV/AIDS, Prevention, Surveillance, and Epidemiology. Single copies of the report are available through the CDC National Prevention Information Network, 1-800-458-5231 or 301-562-1098 or http://www.cdc.gov/hiv/topics/surveillance/resources/reports/2005report/table14.htm

State funded early intervention services in two urban counties, and in the rural and frontier regions of the State; 3,290 clients received services. In FY 2007, the Frontier and Rural Public Health Program (formerly the Bureau of Community Health) received technical assistance from the Substance Abuse and Mental Health Services Administration to provide training on rapid testing for the program's rural Nevada nursing staff. Through collaboration with local coalitions, outreach services were expanded in rural Nevada. In FY 2008, a total of 5,616 clients received services and plans included a continuing focus on the needs of special populations throughout the State.

Full State Narrative

FY 2005 (COMPLIANCE)

Introduction: The goal was met in FY 2005. The 2005 Treatment Continuation Application addressed the needs of special populations and federal funding requirements statewide. The application specifically requested that applicants discuss their ability to comply with identified state and federal funding requirements and restrictions that address HIV Outreach Services. As Nevada is a designated state, an amount of \$649,819 was used to meet the five percent set-aside. How the SAPT Block Grant Funds were used to Meet the Goals, Objectives and Activities in the FY 2005 Application: Services included outreach, based on NIDA's Community-Based Outreach Model, and early intervention for all clients for HIV counseling, testing, and referral. The results of this process indicated that to provide adequate services for substance abusers at risk for or infected with HIV/AIDS, required a well coordinated system for outreach, screening and assessment, as well as access to substance abuse treatment services able to assure adequate healthcare for clients. Nevada continued to support such a system.

Description of the Relevant Nevada Policies, Procedures, and Laws: See Goal #1 for a detailed description of the relevant policies, procedures and laws.

What Services, Programs and Activities were supported: During FY 2005, HIV intervention services were provided through subgrant funding in Clark and Washoe counties (Las Vegas and Reno areas respectively) in conjunction with SAPTA's funded HIV outreach projects conducted by Clark County Health District and Northern Nevada HOPES. The Bureau of Community Health provided HIV intervention services through subgrant funding in the rural and frontier programs that received SAPTA treatment funding. In FY 2005, 3,290 clients received these services.

What progress was Made: Approximately 1,463 individuals at high risk of HIV, as reported through the client data system as injecting drug users, were in funded treatment programs statewide. Programs were required to submit quarterly utilization reports to the Agency indicating the number of on-site visits and clients that received counseling, testing, and referrals. The three agencies provided on-site services an average of twice a week in Clark and Washoe counties and as necessary in the rural areas of the state. Services provided by Clark County Health District, Northern Nevada HOPES, and the Bureau of Community Health were delivered by licensed nurses and included referrals for other health care needs. In FY 2005, no positive tests were discovered.

FY 2007 (PROGRESS)

Introduction: The goal is to continue to implement SAPTA's Strategic Plan and HIV Early Intervention Services to be provided as required. The amount utilized for providing these services statewide is expected to be \$643,315.

Nevada's Progress is Meeting the Goals, Objectives and Activities in the FY 2007 Application: The increased use of Orasure, made possible largely because of increased SAPTA funding to Southern Nevada

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Health District (Clark County), resulted in less resistance to HIV testing by clients. The Bureau of Community Health is obtaining technical assistance through SAMHSA to provide training on rapid testing for the program's rural Nevada nursing staff. Outreach services are being enhanced in rural areas through increased collaboration with local coalitions and monitoring with experienced staff in Clark and Washoe counties. In FY 2007, 4,733 clients received these services.

Description of Recipients of the Block Grant Funds: The three programs providing services are Southern Nevada Health District, Northern Nevada HOPES, and the Bureau of Community Health. Individuals meeting the criteria for substance abuse or dependency, and admitted to a funded treatment program, have HIV early intervention services available on-site. In FY 2007, Southern Nevada Health District, serving the largest population in Nevada (Clark County), utilized SAPT Block Grant funding in the amount of \$10,625 to purchase rapid HIV tests. Through their working relationship with the Center for Disease Control (CDC) and Orasure, additional staff received training as laboratory assistants, and on HIV protocols, which allowed testing and results to be available at substance abuse treatment locations. Currently testing is offered three days a week, for four hours each morning. The Bureau of Community Health has included early intervention services for HIV and outreach activities in the annual nursing staff training. The BCH program manager contacted SAMHSA regarding training support for rapid HIV testing. Northern Nevada HOPES is training new staff and administration, with the assistance of SAPTA's compliance monitoring, to provide the services as required.

FY 2008 (INTENDED USE)

Introduction: The FY 2008 funding will continue to highlight the needs of special populations and federal funding requirements. The anticipated amount for services statewide is \$643,184. On-site monitoring will continue to be conducted for compliance with IDU interim services, and availability of early intervention services for HIV and outreach policies. Procedures include each of the following five required elements: pretest counseling for HIV/AIDS; testing individuals with respect to such disease; provide information on appropriate therapeutic measures for preventing and treating the deterioration of the immune system; appropriate posttest counseling; and provide therapeutic measures or make arrangements for the services. SAPTA requires all funded treatment programs to have policies that address outreach; the protocols must be in compliance with NIDA's Community-Based Outreach Model. This model is comprised of two interrelated concepts designed to identify potential clients and to engage in risk-education interventions.

How the SAPT Block Grant Funds will be used to Meet Required Goals, Objectives and Activities

Who will be Served: Approximately 1,700 individuals will receive these services based on past utilization data.

What Activities/Services will be Provided, Expanded, or Enhanced: The focus of activities will be much as in past years, with activities devoted to outreach and care coordination. In FY 2008 more staff training for Southern Nevada Health District is planned to increase the programming began in FY 2007.

When will the Activities/Services be Implemented: The FY 2008 funding period is July 1, 2007 through June 30, 2008.

Where in the State will the Activities/Services be Undertaken: Activities will continue statewide with services being provided by Southern Nevada Health District in Clark County, by Northern Nevada HOPES in Washoe County, and by the Bureau of Community Health in Nevada's rural areas.

How will the Activities/Services be Operationalized: Activities will be as those indicated in FY 2007; subgrants will again be used to support services.

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HIV Early Intervention Services

During FY 2005, HIV early intervention services were provided in Clark and Washoe counties (Las Vegas and Reno areas respectively) by SAPTA funded HIV outreach projects conducted by the Clark County Health District and Northern Nevada HOPES. These projects provided HIV and TB testing and counseling, and treatment referral of high-risk clients from the substance abuse treatment programs that were funded by SAPTA. The Bureau of Community Health provided HIV and TB services in the remainder of the state. This project provided HIV and TB testing and counseling, and treatment referral for high-risk clients in residential and outpatient programs located in rural Nevada. In FY 2005, SAPTA included HIV and TB testing and counseling services as one of its priority populations to assure that HIV/AIDS and TB services were appropriately provided to all SAPTA clients. Programs were required to submit quarterly utilization reports to the Agency indicating the number of on-site visits and clients that received counseling, testing, and referrals. The three agencies provided on-site services an average of twice a week in Clark and Washoe counties and as necessary in the rural areas of the state. Services for Clark County Health District, Northern Nevada HOPES, and the Bureau of Community Health were provided by licensed nurses and provided referrals for other health care needs.

HIV Early Intervention Programs Receiving Funds

HIV EARLY INTERVENTION FUNDS REPORTED BY STATE PROVIDER								
Program	Status	Address	Phone	Funds				
CLARK COUNTY HEALTH DISTRICT	n/a	701 N. Pecos, Building K Las Vegas, NV 89101	702-749-0711	\$399,769				
NORTHERN NEVADA HOPES	n/a	467 Ralston Street Reno, NV 89513	775-348-2882	\$155,255				

Status Key: [A] Active, [I] Inactive, [n/a] Not available, [P] Facility physically closed, [S] No substance abuse services provided, [U] Closed as duplicate of another facility.

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